



Date Received: _____

Staff Initials: _____

COMMUNITY DEVELOPMENT
BUILDING SERVICES DEPARTMENT
PHONE: (770) 429-4554 FAX: (770) 429-4548
2529 J.O. Stephenson Avenue, Kennesaw, GA 30144

DEMOLITION PERMIT APPLICATION

Dist. _____ Land lot/Par. _____ Zoning _____ Historic area(Y/N) _____

SUBDIVISION/PROJECT NAME: _____

ADDRESS: _____ LOT # _____

CITY/STATE/ZIP: _____

BUILDING USED FOR: _____ SQ. FT: _____

REASON FOR DEMOLITION:

1. a. Is structure located within the City of Kennesaw Historic or Central Business District?
b. Has approval been received from the Kennesaw Historic Committee?
2. Have utility services been disconnected for demolition?
 - a. Electrical (GA Power/Cobb EMC) YES NO N/A
 - b. Gas YES NO N/A
 - c. Phone YES NO N/A
 - d. Water/Sewer (Cobb County) YES NO N/A

CONTRACTOR NAME:

ADDRESS: _____ PHONE: _____

CITY/STATE/ZIP: _____

PROPERTY OWNED BY:

ADDRESS: _____ PHONE: _____

CITY/STATE/ZIP: _____

ITEMS NEEDED BEFORE ISSUANCE:

- ☐ Asbestos abatement letter (entire building) *REQUIRED NO EXCEPTIONS*
- ☐ A plat of property showing location of building to be demolished and any other structures on property.
- ☐ Copy of contractors current business license.
- ☐ Notarized letter from property owner giving permission for demolition.
- ☐ **FEE: \$75.00 plus \$10 Technology Fee** Paid: Cash Credit or Check # _____

NOTE Property owners will be allowed a day labor permit without Business License and Code Compliance Bond, with proof of ownership and property is not covered under City, State or Federal Historic Designation.

Signature of Applicant: _____

Permit approved by/Date: _____

Zoning Official _____ Building Official _____

PERMITS ARE NON-TRANSFERABLE & NON-REFUNDABLE

REVISED March 2017